

**FEE TRANSMITTAL
for FY 2007**

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ 1,300)

FEE TRANSMITTAL for FY 2007		<i>Complete if Known</i>												
<table border="0"> <tr> <td>Application Number</td> <td>10/776,333</td> </tr> <tr> <td>Filing Date</td> <td>02/10/2004</td> </tr> <tr> <td>First Named Inventor</td> <td>Moshman et al.</td> </tr> <tr> <td>Examiner Name</td> <td>Mercier, Melissa S</td> </tr> <tr> <td>Art Unit</td> <td>1815</td> </tr> <tr> <td>Attorney Docket No.</td> <td>077350 0136</td> </tr> </table>			Application Number	10/776,333	Filing Date	02/10/2004	First Named Inventor	Moshman et al.	Examiner Name	Mercier, Melissa S	Art Unit	1815	Attorney Docket No.	077350 0136
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METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

02-4377
Baker Botts L.L.P.

Name _____

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below
- Credit any overpayment(s)
- Charge any additional fee(s) or any underpayment of fee(s)
- Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FFF CALCULATION

Extra Claim Fees

	Extra Claims	Fee	Fee Paid
Total Claims	<input type="text"/>	52	\$0
Independent Claims	<input type="text"/>	220	\$0
Multiple Dependent	<input type="text"/>		\$0
		SUBTOTAL	\$0

Fee Description	Large Entity	Small Entity
Claims in excess of 20	52	26
Independent claims in excess of 3	220	110
Multiple dependent claim, if not paid	390	195

FEES CALCULATION (continued)

ADDITIONAL FEES

- Surcharge - late oath or filing fee
- Non-English Specification
- Extension for reply within first month
- Extension for reply within second month
- Extension for reply within third month
- Extension for reply within fourth month
- Extension for reply within fifth month
- Notice of Appeal
- Filing a brief in support of an appeal
- Petition to revive - unavoidable
- Petition to revive - unintentional
- Utility Issue Fee
- Design Issue Fee
- Publication Fee
- Petitions to the Commissioner
- Request for Continued Examination (RCE)
- Information Disclosure Statement (IDS)

\$490

Other fees:

SUBTOTAL **(S)** **1,300**

SUBMITTED BY

Name (Print/Type) **Jason C. Chumney** Registration No. (Attorney/Agent) **54,781** Telephone **212-408-2500**

be included on this form) Provide credit card information and authorization on PTO-2038. This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain a benefit by the public which is to file to the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and sending the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on this form that require to complete the form, or for any other purpose in this form, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FAX: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.